

For your



Commonwealth of Massachusetts  
Group Insurance Commission

Your  
Benefits  
Connection

# BENEFIT

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Deval Patrick, Governor

Thomas A. Shields, Chair

Dolores L. Mitchell, Executive Director

Summer 2007

## GROUP INSURANCE COMMISSION

Providing State and Participating  
Community Employees, Retirees,  
and Their Dependents with Access  
to Quality Care at  
Reasonable Costs

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**Over 6,900 GIC  
enrollees attended  
this year's  
annual enrollment  
health fairs.  
See inside for  
photos.**

## Find Out Your Co-Pay Before You Visit the Doctor or Hospital

If you have an appointment to see your doctor, or if you are going to be admitted to the hospital, find out your co-pay before you go:

- ◆ Contact your health plan or look in your plan's provider directory to find out your co-pay amount.
- ◆ If you are choosing a doctor, or planning for an inpatient admission, give some attention to the tier your plan has assigned to the providers you are considering.

Most GIC Non-Medicare Plans have tiered co-pays for doctors and, in some plans, hospitals as well. By finding out your co-pay before you visit the doctor, you will make sure you pay the correct co-pay up front and avoid paying a bill, or needing to ask for a refund later. You will also save your provider the effort and expense of having to send you a bill.

The GIC's health plans assign doctors and hospitals to the better and lower co-pay Tier 1 if they provide high quality and cost-effective care. Data that identified differences in physician cost-effectiveness and quality was given to our health plans to develop benefit designs in which members are given modest co-pay incentives to use better performing doctors. This program, called the Clinical Performance Improvement Initiative, seeks to improve health care quality while containing costs. All of the GIC's Non-Medicare Plans tier providers, or have selective networks, in accordance with this initiative and are designated as "Select & Save" plans.

*GIC Chair, Thomas A. Shields (left), GIC Executive Director, Dolores L. Mitchell, and Dr. Timothy Johnson, Medical Editor of Good Morning America, recently met to discuss the GIC's Clinical Performance Improvement Initiative.*





## How We Die in Massachusetts



**H**ow do you want to die? That's a tough question to broach with loved ones. Americans are much more likely to talk with their children about safe sex and drugs than we are to talk with parents about end-of-life choices. Eighty percent of Americans wish to die at home - alert, without pain, and surrounded by family and friends, according to National Hospice Foundation research. Yet only 22% of Massachusetts terminally ill patients die at home. Forty-five percent die at hospitals, followed by 33% who die in nursing homes.

On average, 154 people die in the Commonwealth every day according to the Massachusetts Department of Public Health. Forty of these people die from heart disease, 37 from cancer, 17 from respiratory disease, and 9 from strokes. Other causes make up the remainder. Many of these conditions are chronic, often giving time for families to discuss end-of-life wishes.

Facing up to the fact that you or a loved one is dying is difficult, and often we want the medical profession to do everything it can to prolong patients' lives. According to research conducted by the Division of Health Care Finance and Policy in July 2006, 41.9% of terminally ill patients in teaching hospitals and 22% in community hospitals have more than three significant procedures in an attempt to prolong their lives. The most common procedures prolong life for only a very brief time:

- ◆ Insertion of a continuous mechanical ventilator
- ◆ Insertion of an endotracheal tube

Forty-six percent of terminally ill patients spend time in the Intensive Care Unit at teaching hospitals; 36.8% of community hospital patients do.

However, hospitals are not necessarily the best places to treat terminally ill patients. Hospice patients live an average of 29 days longer than terminally ill non-hospice patients, according to a study published in the *Journal of Pain and Symptom Management* in March 2007. Several factors were cited for the longer life of hospice patients. Most prominently, patients in a weakened condition avoid the risks of over-treatment. Secondarily, the study surmises that hospice care improves patients' monitoring and care. Additionally, hospice care focuses on the emotional, spiritual and physical health of the patient.

Hospice programs provide quality care, focusing on comfort and dignity for persons who are ill and their loved ones. It is a fully covered benefit under all GIC plans:

- ◆ A team of professionals offering expert medical care, pain management, emotional and spiritual support in keeping with the patient's needs
- ◆ Emotional support for the patient's loved ones
- ◆ Aggressive treatment of pain to make the person comfortable
- ◆ Choice of in-home, hospice facility, or nursing home care
- ◆ 24-hour, seven days a week care
- ◆ A comprehensive care plan incorporating the needs of the patient, his/her medical team, and loved ones
- ◆ Grief services and support for family members for at least 12 months after death

According to the Division of Health Care Finance and Policy's research, the vast majority of patients do not have an advance directive (written instructions outlining your care and treatment wishes in the event you cannot speak for yourself).

"How would you like your choices honored at the end of life?" "Would you like to spend your final days at home or in a home-like setting?" These are two good approaches into difficult discussions about end of life preferences. To ensure that your end-of-life care wishes are followed, regardless of your health, you should:

- ◆ Have a medical power of attorney indicating who will make medical decisions for you if you are unable to do so (also called a Health Care Agent)
- ◆ Draw up an advance directive (living will)

Encourage your loved ones to do the same. State-specific advance directives, instructions, and information on where to keep them, are available on the National Hospice and Palliative Care Organization's website: [www.nhpco.org](http://www.nhpco.org). The Organization can also assist you with finding hospice professionals in your area. Physicians, nurses, social workers, clergy and the Commonwealth's Executive Office of Elder Affairs can also be helpful.



## Dependents 19 and Over Reminders and News

If you have a dependent age 19 and over, please remember to complete and return to the GIC the *Dependent Age 19 and Over Application for Coverage* form whenever any of the following events occur:

- ◆ Within 30 days of when your dependent turns age 19
- ◆ If your dependent:
  - ❖ Is no longer a full-time student at accredited school
  - ❖ Withdraws from school
  - ❖ Is on a medical leave of absence from school or a medical leave of absence ends
  - ❖ Graduates
  - ❖ Ceases to be an IRS dependent
- ◆ When your health plan sends you a recertification request

The form is available on the GIC's website and through your agency's GIC Coordinator. Keep in mind that the insured must have family coverage. Failure to complete and return the form after an event change may result in loss of coverage and other financial consequences.

### Non-IRS Dependents

If you have a Non-IRS Dependent you are subject to imputed income, which means you will pay taxes on the value of the full cost individual premium for the health plan in which you are enrolled. The amount of imputed income depends on your tax bracket. In general, if you are in the 28% tax bracket, you would pay additional income taxes equal to 28% of the full-cost individual rate of your health plan. Full cost rates are on the GIC's website. For IRS dependent status rules, refer to federal income tax filing instructions, IRS Publication 501, or contact a tax professional. Contact your payroll coordinator if you wish to increase your W-2 withholdings.



*Jennifer St. Thomas of Tufts Health Plan discusses Navigator by Tufts Health Plan benefits.*

## Prescription Drug Reminders and News

### Mandatory Generics

Some GIC Plans have programs to encourage the use of safe, effective and less costly prescription drugs. One of these programs is mandatory generics, which has been implemented in the Commonwealth Indemnity Plans' prescription drug program managed by Express Scripts and Navigator by Tufts Health Plan. If you are a member of a plan that mandates generics, and you fill a prescription for a brand-name drug for which there is a generic equivalent, you will be responsible for the cost difference between the brand-name drug and the generic, plus the generic co-pay. Contact your Plan for additional details.



### Formulary Change for Commonwealth Indemnity Plan Members

In January of 2006, the GIC made a difficult decision to remove Lipitor®, a popular cholesterol lowering drug, from the Commonwealth Indemnity Plans' prescription drug formulary, which is managed by Express Scripts. At that time, Pfizer, the manufacturer of Lipitor® and Express Scripts had been unable to conclude successful negotiations. Recently, negotiations resumed and now Lipitor® has been returned to the formulary effective June 1, 2007. The retail co-pay of up to a 30-day supply is now lowered to \$20 at retail and \$40 for up to a 90-day mail order supply. Lipitor® is still subject to Step Therapy and members must first try lower cost generics before Lipitor® will be covered. For additional information, contact Express Scripts at 1-877-828-9744 or visit them online at [www.express-scripts.com](http://www.express-scripts.com).



*Bill Govostes (center right) and Brent Blazej of Health Watch, Inc. discuss cardiovascular screening results with GIC members.*

## Meet Mary Ann Bradley, The GIC's Newest Commissioner



*New Commissioner Mary Ann Bradley brings a strong record of building consensus among state agencies.*

If you are a long-time state employee, you might know the GIC's newest Commissioner, Mary Ann Bradley, Assistant Secretary of Administration and Finance. Commissioner Bradley has worked in state government for over 21 years, bringing a wealth of public service expertise to her role on the Commission as the Designee for Leslie A. Kirwan, Secretary of Administration and Finance. Some of the agencies that she has worked for include the Massachusetts

Port Authority, the Office of the Comptroller, and the Massachusetts Highway Department. Working at Administration and Finance is a homecoming of sorts, as the Commissioner previously served as the agency's Director of the Executive Branch's Central Business Office.

With a strong record of revitalizing processes, creating efficiencies, and building consensus among state agencies,

she is well suited to the complexities and challenges that the Commission faces. "I am impressed with the depth of knowledge, collective experience and dedication of the commissioners," said Commissioner Bradley. "There is a true understanding of our responsibility to provide quality benefits at a reasonable cost."

These dual objectives are challenging and greater enrollee participation is part of the solution. "We must continue to encourage an even greater understanding of health care trends and subsequent impacts on current standard practices," she says. "With greater understanding, we can broaden our response to current health care challenges and truly develop unique solutions that satisfy all stakeholders," she continued.

The GIC can also help cities and towns control soaring health care costs according to the Commissioner. "I am proactively supportive of the administration's objective to create a new local option for municipalities to purchase their health insurance through the GIC," she said.

We extend a warm welcome to our newest Commissioner!



*Sharon Murphy, LPN of Fallon Community Health Plan, demonstrated grip strength at the GIC health fairs.*



*Elizabeth Dolan of Unum shows off their marketing brochures and describes the special GIC Long Term Disability open enrollment.*





## Massachusetts Children Can Use Your Help

Improving the life of a child has many rewards and there are thousands of children who can use your help. “Quincy was just an energetic young kid, and he really loved music. He wanted to learn how to write, and of course, I knew how to write, and that drew us together. You could tell that he wanted to learn, he wanted to know. And because I was able to show him some things, that made me happy, that’s what stirred my heart,” said the late musician, Ray Charles, on his relationship with this year’s Mentor of the Year winner, music entrepreneur Quincy Jones. Being a mentor can involve as little as a few hours a week to the full-time commitment of being a foster care parent. State employees and retirees alike find that helping children in need is both rewarding and fulfilling.

To encourage state employees to help others, employees get the equivalent of one paid workday a month for mentoring a child under Governor Deval Patrick’s “State Employees Responding as Volunteers” initiative. Foster Care parents also have access to a leave benefit. *Visit the Human Resource Division’s website at [www.mass.gov/HRD](http://www.mass.gov/HRD), or see your agency’s payroll department for details.*

### MENTORING PROGRAMS

#### Mass Mentoring Partnership:

This statewide umbrella agency for the Commonwealth’s youth mentoring programs can help you explore and connect with available mentoring opportunities in your area, including the two programs discussed in the next column. MMP can also assist you with a better understanding of the Commonwealth’s mentoring leave time program. *Go to [www.massmentors.org](http://www.massmentors.org) or call 1-866-627-7636 for details.*

#### Big Sister Association of Greater Boston:

For over 50 years, this organization has matched at-risk girls ages 7 to 15 with a caring, supportive mentor in over 65 Massachusetts communities. As a mentor, you decide how to spend time with your Little Sister, whether it’s going to the park, playing a board game, or going to the movies. Your time, friendship, and commitment will help to increase your Little Sister’s confidence, competence in school, participation in extracurricular activities, and respect and trust in others. *For additional details, contact Big Sisters at 617-236-8060; [www.bigsister.org](http://www.bigsister.org).*

#### Big Brothers of Massachusetts Bay:

Similar to the Big Sister Association of Greater Boston, this organization matches children with mentors in professionally supported one-to-one relationships. The organization serves children ages 6 through 18 in community-based one-on-one mentoring programs, as well as school-based programs, throughout Eastern Massachusetts. *Contact 617-542-9090 or [www.bbbsmb.org](http://www.bbbsmb.org) for more information.*

### FOSTER CARE

With approximately 8,000 Massachusetts children in foster care, there is a great need for families willing to open their hearts and homes. You will be providing a safe home for a child who has been removed from a home due to abuse, neglect, unsafe, or dangerous conditions. Children of all ages and communities need help. *For additional details, contact 1-800-KIDS-508 or [www.dsaskids.org](http://www.dsaskids.org).*



*Brenda Meyers and Aimee MacNary of Express Scripts and Amanda Satulovsky from CuraScript, Inc., Express Scripts’ specialty drug pharmacy (left to right), go bug eye for prescription drug benefits.*



*Bob Johnson, Nancy Bolduc and Paul Murphy (left to right) of the GIC described benefit options and expedited annual enrollment changes with an automated enrollment system at the GIC fairs.*



"I am writing to complain about tactics used by certain health [plans] during the open enrollment period. In the past, I have enrolled in health plans announced with great fanfare as providing comprehensive coverage at reasonable costs. The plan either disappears or makes dramatic changes which mandate I switch plans. The latest example is Community Choice. Their booklet, and also the GIC overview, failed to point out that they did not cover routine eye exams. The result – a total of \$500 for my family's eye exams instead of \$10 to \$15 co-pays offered by other plans. This year, Community Choice has deleted Milton Hospital, where our doctors and specialists practice. I think more time should be spent by the GIC in reviewing health plan providers and their misleading brochures. I dread changing plans again, but I must." K. Kelly, Milton, MA

*Editor's Note: We encourage you to carefully review the GIC Benefit Decision Guide each year to find out about benefit changes and to get an overview of your options. The Community Choice Plan's eye exam benefit has not changed since last year, and it is, therefore, not in the benefit change section of the guide. It is one of many benefits that we do not*

*detail in the guide, unlike plan handbooks, which detail all benefits. The guide is strictly an overview of all GIC plan options. Most employees have vision screening benefits through their union-based vision plan. Executive branch managers have vision screening benefits under the GIC Dental/Vision plan.*

*During annual enrollment, we encourage you to contact the health plans you are considering to find out information on the benefits that are of importance to you. Health plans may change their provider networks (doctors and hospitals that participate in the plan) each year, as well as which co-pay tier doctors and hospitals are in.*

The GIC welcomes your feedback. We will include selected letters in our newsletter. Or, submit a letter and request that we not reprint it. The GIC reserves the right to edit your comments for clarity and space considerations. All letters must be signed with your name and address. Send Letters to the Editor to Cynthia McGrath, Editor, *For Your Benefit*, Group Insurance Commission, PO Box 8747, Boston, MA 02114-8747.



*Neighborhood Health Plan sponsored complimentary skin screenings at the GIC health fairs. Members looked under the hood and saw sun damage on their faces.*



*Derry Fellows of The Hartford (left) and GIC Executive Director, Dolores L. Mitchell discussed GIC life insurance benefits.*

## Morale Issues? Help Is Only a Call Away

If morale at your agency isn't what it could be, take advantage of the GIC's Employee Assistance Program (EAP), which is free to state agencies. The GIC's EAP Coordinator, Sue Cooper, a Licensed Independent Clinical Social Worker for United Behavioral Health, can tailor a program to your agency's needs. Presentations are given on a one-on-one or group basis, depending on your needs. Managers or Supervisors just need to call to take advantage of this popular program.

Other issues that the EAP program can address include:

- ◆ Stress Management
- ◆ Disgruntled employees
- ◆ Inappropriate or abusive behavior
- ◆ Hygiene issues
- ◆ Mental illness
- ◆ Potential violence
- ◆ Substance abuse
- ◆ Eating disorders

Critical Incident Debriefings for employees who have witnessed traumatic events are also offered. *Contact United Behavioral Health at 1-888-610-9039 or Sue Cooper directly at 781-472-8448 for additional information and to schedule a consultation.*



Maggie Dziedzic (left) of Harvard Pilgrim Health Care talks with an employee at the Quinsigamond Community College health fair.

### GIC BENEFIT ACCESS

#### Health Insurance

Commonwealth Indemnity Plan, Commonwealth Indemnity Plan Community Choice Plan, Commonwealth Indemnity Plan Medicare Extension (OME), Commonwealth Indemnity Plan PLUS (UNICARE) 1-800-442-9300  
www.unicare-cip.com

\*Prescription Drugs (*Express Scripts*) 1-877-828-9744  
www.expressscripts.com

\*Mental Health/Substance Abuse and EAP (United Behavioral Health) 1-888-610-9039  
www.liveandworkwell.com (access code: 10910)

Fallon Community Health Plan Direct Care, Select Care Senior Plan 1-866-344-4442  
www.fchp.org

Harvard Pilgrim Health Care - Independence Plan 1-800-333-4742  
www.harvardpilgrim.org/gic  
First Seniority Freedom 1-800-421-3550  
www.harvardpilgrim.org

Health New England HMO, MedRate 1-800-310-2835  
www.hne.com

Navigator by Tufts Health Plan 1-800-870-9488  
www.tuftshealthplan.com/gic  
Mental Health/Substance Abuse and EAP (United Behavioral Health) 1-888-610-9039  
www.liveandworkwell.com (access code: 10910)

Neighborhood Health Plan NHP Care 1-800-462-5449  
www.nhp.org

Tufts Health Plan Medicare Complement Medicare Preferred 1-888-333-0880  
www.tuftshealthplan.com

#### Other Benefits

Life Insurance and AD&D (*The Hartford*) Call the GIC 1-617-727-2310, ext. 1  
www.mass.gov/gic

Long Term Disability (LTD) (*Unum*) 1-877-226-8620  
www.mass.gov/gic

Employee Assistance Program (EAP) for Managers and Supervisors (*United Behavioral Health*) 1-888-610-9039  
www.liveandworkwell.com (access code: 10910)

Health Care Spending Account (HCSA) and Dependent Care Assistance Program (DCAP) (*SHPS*) 1-866-862-2422  
www.mass.gov/gic

GIC Retiree Vision Discount Plan (*Davis Vision*) 1-800-783-3594  
www.davisvision.com

GIC Retiree Dental Plan (*MetLife*) 1-866-292-9990  
www.metlife.com/gic

Dental Benefits for Managers, Legislators, Legislative staff and Executive Office staff (*MetLife*) 1-866-292-9990  
www.metlife.com/gic

Vision Benefits for Managers, Legislators, Legislative staff and Executive Office staff (*Davis Vision*) 1-800-650-2466  
www.davisvision.com

#### Other Resources

Social Security Administration (*Federal Program*) 1-800-772-1213  
www.ssa.gov

Medicare (*Federal Program*) 1-800-633-4227  
www.medicare.gov

State Board of Retirement 1-617-367-7770  
www.mass.gov/treasury/srb.htm

#### Other Questions

Group Insurance Commission 1-617-727-2310  
TDD/TTY Access 1-617-227-8583  
(website hospital research password: quality) www.mass.gov/gic

For Your Benefit is published by the Massachusetts

GROUP INSURANCE COMMISSION

Dolores L. Mitchell, Executive Director

Cynthia McGrath, Editor

## Two \$2,500 Scholarships for College Students



**T**ufts Health Plan, the administrator of the Navigator Plan, is sponsoring two \$2,500 scholarships for dependents of GIC-eligible employees and retirees. Parents and guardians of current undergraduate students should encourage their children to apply. Completed applications, including a cover letter, the required essay, a letter of recommendation, copy of the student's most recent college transcript, and a resume (optional) **MUST** be received by the GIC no later than 5 PM on July 27, 2007. Scholarship recipients will be notified by August 24, 2007.

### Scholarship Eligibility Criteria:

- ◆ Undergraduate student currently enrolled full-time in any two or four-year public or private college or university, and who has completed at least one semester of college as of Friday, July 27, 2007.

- ◆ Minimum college Grade Point Average of 3.0.
- ◆ Demonstrated interest in a career in public service, preferably with a health care focus. Preference will be given to those applicants who plan on a career in the allied health field.
- ◆ The scholarship recipient's parent or legal guardian must be eligible for health insurance through the GIC at the time of the award.

*Download the scholarship application from the GIC's website: [www.mass.gov/gic](http://www.mass.gov/gic). Or, to receive an application by mail, send a self-addressed stamped envelope to the Scholarship Committee, GIC, P.O. Box 8747, Boston, MA 02114-8747.*



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